



**Financial Affairs Division  
Arizona Department of Insurance**

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**CHECKLIST FOR  
APPLICATION FOR LIFE CARE PROVIDER PERMIT**

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Review Arizona Revised Statutes (ARS) § 20-1801 through § 20-1812 and our *Notice of License Requirements Form ENLR*.

After a preliminary review of the application is conducted, the Arizona Department of Insurance (Department) Examinations Section may be assigned to perform a pre-admission examination of all books and records pursuant to ARS § 20-156. This examination will be made in the office where the entity's books and records are maintained or at the Department and then reviewed by an examination supervisor. The expense of the examination will be billed to the applicant or the Arizona representative of the applicant.

Provide the following:

1. An *Application for Life Care Provider Permit Form E652*.
2. A copy of the Provider's original Articles of Incorporation and all Amendments or other organizational documents.
3. A copy of the Provider's current Bylaws or other organizational documents.
4. An *NAIC Company Code Application*. Return it to the Department and NOT to the NAIC. The Department will process this form for the Provider.
5. A completed *NAIC Biographical Affidavit Form 11* for each of the Provider's officers and director and the Provider's ultimate controlling party's officers and directors.
6. If the Director of Insurance is to be appointed Statutory Agent pursuant to A.R.S. § 20-218.01A, a completed *NAIC Uniform Consent to Service of Process and Resolution Authorizing Appointment of Power of Attorney Form 12*.
7. A check in the amount of \$450.00 made payable to the *Arizona Department of Insurance* for application fees.
8. A check in the amount of \$100.00 made payable to the *Insurance Examiners' Revolving Fund* for the Insurance Examiners' Revolving Fund Deposit.